

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION - DETROIT

IN THE MATTER OF:

SONYA ANDERSON,

Debtor:

Case No. 21-44750-lsg
Honorable LISA S. GRETCHKO
Chapter 7

8643 Kinloch
Dearborn Heights, MI 48127
XXX-XX-3680

LEASE ASSUMPTION AGREEMENT

I agree to assume the Lease Agreement ("Lease"), described below (See Description of Lease), with Lincoln Automotive Financial Services, ("Creditor") pursuant to 11 U.S.C. §365(p) and agree to make the monthly payments, listed below (See Payments Due Under Lease) required under the Lease, which is hereby incorporated by reference. I further agree to be bound by all the terms and conditions of the Lease including but not limited to any and all liability for excess mileage, excess wear and use, and any other amounts required by the Lease. I agree that any protections afforded under 11 U.S.C. §524(a) do not apply to this Lease.

Description of Lease

Lease Date: April 20, 2021

Vehicle Description: 2021 Lincoln Aviator (VIN: 5LM5J7XC0MGL09341)

Account No.: 5278

Payments Due Under Lease

The next monthly lease payment under the lease is due on June 20, 2021. I agree to continue to make my monthly lease payments as required under the lease on the 20th day of each month until the lease termination date. The lease termination date is: April 20, 2024. In addition to my normal monthly payments, I agree to cure the default, if any, listed below:

Payments on the Lease are are not in default.

I will pay \$821.60 a month for 34 months according to the terms and conditions of the Lease Agreement.

I assume the Lease through this Lease Assumption Agreement,

Date: 10/30/21

/s/ Sonya A. Anderson
Lessee (Debtor)

/s/ N/A
Co-Lessee (Co-Debtor)

Approved by Debtor's Attorney: /s/ R. Thomas Bidari Date: 7-1-21
R. Thomas Bidari, Law Offices of R. Thomas Bidari PC, 204 Oak St., Wyandotte, MI 48192, (734) 283-5100, lawoffices@awyan.org

Accepted by Creditor by its Attorney or Agent: /s/ Cassandra Mayard Date: 7/2/2021
Kilpatrick & Associates, P.C., 903 North Opdyke Road, Suite C, Auburn Hills, MI 48326, (248) 327-0700, ecly@kaalaw.com

Printed or Typed Name: /s/ Cassandra Mayard

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**STIPULATION FOR ASSUMPTION OF THE LEASE AGREEMENT
BETWEEN DEBTOR AND LINCOLN AUTOMOTIVE FINANCIAL SERVICES**

Lincoln Automotive Financial Services ("Creditor") and the Debtor, and her undersigned counsel, who hereby stipulate and agree to the Assumption of the Lease Agreement between Creditor and the Debtor regarding the lease of a 2021 Lincoln Aviator (VIN: 5LM5J7XC0MGL09341) under the terms of the Lease Assumption Agreement attached hereto. The Debtor agrees to comply with the terms and conditions of the Lease Agreement and waive the effect of the discharge under 11 U.S.C. §524(a) as to the assumed Lease Agreement.

STIPULATED TO:

LAW OFFICES OF R. THOMAS BIDARI PC

[Signature]
R. THOMAS BIDARI, ESQ. (P 41618)
Attorney for Debtor
Law Offices of R. Thomas Bidari PC
204 Oak St.
Wyandotte, MI 48192
lawoffices@wyan.org
(734) 283-5100

KILPATRICK & ASSOCIATES, P.C.

[Signature]
CASSANDRA H. WEYANT, ESQ. (P83509)
Attorneys for Creditor, Lincoln Automotive Financial
Services
903 North Opdyke Road, Suite C
Auburn Hills, MI 48326
ecf@kaalaw.com
(248) 377-0700

[Signature]
Sonya Anderson
Debtor
8643 Kinloch
Dearborn Heights, MI 48127

Date: June 30, 2021

Fill in this information to identify your case:

Debtor 1	Sonya Anderson
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN
Case number (If known)	

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:
MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Employment status	Debtor 1	Debtor 2 or non-filing spouse
		<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
	Occupation	Commercial Booking Analyst	
	Employer's name	Comerica Bank	
	Employer's address	39200 W Six Mile Livonia, MI 48152	

How long employed there?

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1	For Debtor 2 or non-filing spouse
2. \$ 4,103.76	\$ N/A
3. +\$ 0.00	+\$ N/A
4. \$ 4,103.76	\$ N/A

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
3. Estimate and list monthly overtime pay.
4. Calculate gross income. Add line 2 + line 3.

Debtor 1 **Sonya Anderson**

Case number (if known) _____

Copy line 4 here _____

	For Debtor 1	For Debtor 2 or non-filing spouse
4.	\$ 4,103.76	\$ N/A

5. List all payroll deductions:

- 5a. Tax, Medicare, and Social Security deductions
 5b. Mandatory contributions for retirement plans
 5c. Voluntary contributions for retirement plans
 5d. Required repayments of retirement fund loans
 5e. Insurance
 5f. Domestic support obligations
 5g. Union dues
 5h. Other deductions. Specify: _____

5a.	\$ 843.76	\$ N/A
5b.	\$ 0.00	\$ N/A
5c.	\$ 0.00	\$ N/A
5d.	\$ 0.00	\$ N/A
5e.	\$ 0.00	\$ N/A
5f.	\$ 0.00	\$ N/A
5g.	\$ 0.00	\$ N/A
5h.+	\$ 0.00	+ \$ N/A

6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.

6. \$ 843.76 \$ N/A

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7. \$ 3,260.00 \$ N/A

8. List all other income regularly received:

- 8a. Net income from rental property and from operating a business, profession, or farm
 Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.
 8b. Interest and dividends
 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive
 Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.
 8d. Unemployment compensation
 8e. Social Security
 8f. Other government assistance that you regularly receive
 Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.
 Specify: _____
 8g. Pension or retirement income
 8h. Other monthly income. Specify: _____

8a.	\$ 0.00	\$ N/A
8b.	\$ 0.00	\$ N/A
8c.	\$ 103.00	\$ N/A
8d.	\$ 0.00	\$ N/A
8e.	\$ 0.00	\$ N/A

8f. \$ 0.00 \$ N/A
8g. \$ 0.00 \$ N/A
8h.+ \$ 0.00 + \$ N/A**9. Add all other income.** Add lines 8a+8b+8c+8d+8e+8f+8g+8h.

9. \$ 103.00 \$ N/A

10. Calculate monthly income. Add line 7 + line 9.

10. \$ 3,363.00 + \$ N/A = \$ 3,363.00

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _____

11. +\$ 0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.
 Write that amount on the *Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data*, if it applies

12. \$ 3,363.00

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

- No.
 Yes. Explain: _____

Fill in this information to identify your case:

Debtor 1	Sonya Anderson
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number (if known)	

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.

Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and
Debtor 2.

Yes. Fill out this information for
each dependent.....

Do not state the
dependents names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Daughter	13	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes
Granddaughter	13	

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,208.27

If not included in line 4:

- | | |
|---|---------------------|
| 4a. Real estate taxes | 4a. \$ <u>0.00</u> |
| 4b. Property, homeowner's, or renter's insurance | 4b. \$ <u>0.00</u> |
| 4c. Home maintenance, repair, and upkeep expenses | 4c. \$ <u>50.00</u> |
| 4d. Homeowner's association or condominium dues | 4d. \$ <u>0.00</u> |
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. \$ <u>0.00</u> |

Your expenses

Debtor 1 **Sonya Anderson**

Case number (if known) _____

6. Utilities:

6a. Electricity, heat, natural gas	6a. \$	200.00
6b. Water, sewer, garbage collection	6b. \$	63.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	150.00
6d. Other. Specify: _____	6d. \$	0.00

7. Food and housekeeping supplies

8. Childcare and children's education costs	8. \$	0.00
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9. Clothing, laundry, and dry cleaning

10. Personal care products and services	10. \$	45.00
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11. Medical and dental expenses

12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	100.00
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13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
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14. Charitable contributions and religious donations

15. Insurance.	14. \$	0.00
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Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	162.50
15d. Other insurance. Specify: _____	15d. \$	0.00

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: IRS	16. \$	85.00
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17. Installment or lease payments: 17a. Car payments for Vehicle 1	17a. \$	780.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify: _____	17c. \$	0.00
17d. Other. Specify: _____	17d. \$	0.00

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$	0.00
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19. Other payments you make to support others who do not live with you. Specify: _____	19. \$	0.00
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20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00

21. Other: Specify: _____	21. +\$	0.00
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22. Calculate your monthly expenses 22a. Add lines 4 through 21.	\$	3,343.77
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	3,343.77
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,343.77

23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,363.00
23b. Copy your monthly expenses from line 22c above.	23b. -\$	3,343.77
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$	19.23

24. Do you expect an increase or decrease in your expenses within the year after you file this form?
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here: _____